ailing Address (include city and zip code)	RENO, NV	8	9502	775 856 016	District (if applicable)
				Telephone No.	·
-Mail Address				-/	11
elect Appropriate Box(es) CANDIDATE	¶PAC □BA	.G POLPR	TY IND EXP	AMENDED A	NNUAL FILING
Annual Filing - Due Jan Period: January 1, 2003 - December	uary 15, 20 31, 2003	004		EII	
Panart#4 Dua August 1	4 0004			FIL	-E
cumbents in an Office with a 6-year term Pe	eriod: Jan. 5 eriod: Dec. 2	, 2001 — Aug 26, 0, 1998 — Aug 2	6, 2004	OCT 2 5	
		2004 – Aug. 26, 5, 2002 – Aug 26,		SECREAN HE	LIED W
Report #2 Due — October	•	7, 2004 — Oct. 2	1. 2004	SECRETARY O	F STATE
Report #3 Due — January	15 2005*		•		
Pe	riod: Oct. 22	2, 2004 — Dec. 3			
AGs only: Pe	riod: Oct. 22	2, 2004 - Dec. 5,	2004		
Annual Filing – Due Janua		0.4			
Period: January 1, 2004 – Dec Fhird Report suffices for 2005 Annua	ember 31, 20 I Filing if car	_{U4} Ididate also fi	led Report Nos.	1 and 2	
CONTRIBUTIONS SU	IMMARY				Cumulative From Beginnin
oon mad none of				This Desired	of Report Perio
				This Period	of This Reporting
					Period
Total Monetary Contributions Recei	ved in Excess	of \$100		\$6,500	\$67,500
2. Total Monetary Contributions Recei	ved of \$100 or	Less		0	0
		This Period	Cumulative From		
			Beginning of Report Period #1		
			Through End of This Reporting		
3 Total Amount of Manatany Contril			Period	-	1
 Total Amount of Monetary Contril Received 	วนตอกร			\$6,500	\$67,500
(A -1-11 : 4 1.0)					1
(Add Lines 1 and 2) 4 Total Value of In Kind Contributions	Doccived in		1		
4. Total Value of In Kind Contributions Excess of \$100	Received in	0	0		.
4. Total Value of In Kind Contributions	Received in	0	0	-	
4. Total Value of In Kind Contributions	-			-	
4. Total Value of In Kind Contributions	-	0 ENSES SUI			
Total Value of In Kind Contributions Excess of \$100 Total Monetary Expenses Paid in Expenses	EXP			\$26,000	\$91,500
 4. Total Value of In Kind Contributions Excess of \$100 5. Total Monetary Expenses Paid in Ex 6. Total Monetary Expenses Paid of \$1 	EXP			\$26,000	\$91,500
 Total Value of In Kind Contributions Excess of \$100 Total Monetary Expenses Paid in Extended Total Monetary Expenses Paid of \$1 Total Amount of All Monetary Exp (Add Lines 5 and 6) 	EXP access of \$100 00 or Less enses Paid				\$91,500 0 \$91,500
 Total Value of In Kind Contributions Excess of \$100 Total Monetary Expenses Paid in Extended Total Monetary Expenses Paid of \$1 Total Amount of All Monetary Expenses 	EXP access of \$100 00 or Less enses Paid			0	0

LIUNA P A C

Name (print)

Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
LABORERS' UNION LOCAL 169 570 REACTOR WAY RENO, NV 89502	08/30/04	\$4,000	
LABORERS' UNION LOCAL 169 570 REACTOR WAY RENO, NV 89502	10/08/04	\$2,500	

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LIUNA P A C

Name (print)

Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	Α
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	Н
** Goods and services provided in kind for which money would otherwise have been paid	1
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	к

^{**} NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

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LIUNA P A C

Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A 365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
WHITE RABBIT P A C 570 REACTOR WAY RENO, NV 89502	J	08/30/04	\$2,000
NEVADA REPUBLIC ALLIANCE 570 REACTOR WAY RENO, NV 89502	J	08/30/04	\$9,0 0 0
CHRIS GIUNCHIGLIANI 706 BRACKEN AVE LAS VEGAS, NV 89104	J	09/07/04	\$1,000
BARBARA PRICE 1775 FAIRFIELD AVE RENO, NV 89509	J	09/22/04	\$500
NEVADA REPUBLIC ALLIANCE 570 REACTOR WAY RENO, NV 89502	J	09/24/04	\$9,000
WHITE RABBIT P A C 570 REACTOR WAY RENO, NV 89502	J	09/24/04	\$3,000
DAVID LOVE P.O. BOX 8067 RENO, NV 89507	J	09/24/04	\$1,000
PETE SFERRAZZA 932 UNIVERSITY RIDGE COURT RENO, NV 89512	J	09/24/04	\$ 500

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IN KIND CONTRIBUTIONS AND EXPENSES REPORT

IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

Examples of in kind contributions: (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

Example of in kind expenses: (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

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PAGE	5	OF	7	

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Name (print)

Office (if applicable)

District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION	CHECK HERE IF LOAN
			0	

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	CIVA		~	_

Name (print)

Office (if applicable)

District (if applicable)

IN KIND

Expenses in Excess of \$100 Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE

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Prescribed by Secretary of State NRS 294A.120, 294A.125, 294A.140, 294A.150, 294A.160 294A.200, 294A.210, 294A.220, 294A.362

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